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Assessment of Perceived Knowledge and Attitude of Nurses on Legal Implications of Negligence in Delivering Care in University of Abuja Teaching Hospital, Gwagwalada, Nigeria

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Abstract

Background: Medical malpractice is rising, requiring legal action to protect patients. Laws should hold physicians, nurses inclusive, accountable and impose punitive measures on practitioners whose negligence harms patients. **Aim:** This study evaluated nurses' knowledge and attitudes regarding the legal consequences of negligence in patient care as well as the factors responsible at the University of Abuja Teaching Hospital. **Methods:** The study used a descriptive design with convenient sampling to select 147 participants. Data was collected via questionnaires and analysed using SPSS v26. **Results:** Results showed 82% of UATH nurses were aware of negligence's legal implications. Most demonstrated high level of knowledge (mean score 3.86) and positive attitudes (mean score 3.03) towards legal implication of negligence in delivering their care. Key factors contributing to negligence include poor nurse-patient communication, failure to consult higher authorities, heavy workloads, and nurse shortages among other factors. **Recommendation:** It was then recommended that nurses and nursing students should undergo some special training and retraining on laws guiding the profession, hospitals should educate patients /clients on their rights and limitations as well as nurse's rights and encourage best practices in their establishments.

Keywords: Assessment, Awareness, Attitude, Knowledge, Negligence
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Introduction

The Joint Commission on Accreditation of Healthcare Organisations (JCAHO) defines negligence as a failure to use such care as a reasonably prudent and careful person would use under similar circumstances (Eileen, 2022). There is a need to caution nurses who have sent many patients to their untimely graves in their professional duties. It would, in addition, aid in restoring people's confidence in the nursing profession. Increasingly, there is a need for patients to be protected from medical practitioners who no longer see their professional calling as lifesaving but rather as money money-making venture (Eric, 2018).

More nurses have been named defendants in malpractice lawsuits over the years, according to the National Practitioner Data Bank (NPDB). From 1998 to 2001, for example, the number of malpractice payments made by nurses went up from 253 to 413. The trend shows no signs of stopping, despite efforts by nursing educators to inform nurses and student nurses of their legal and professional responsibilities and limitations. A charge of

negligence against a nurse can arise from almost any action or failure to act that causes patient injury, most often, an unintentional failure to meet a standard of clinical practice and may lead to a malpractice lawsuit (Eileen, 2022).

Adeleke (2009) reported that there are grievous cases of negligence in hospitals today in Nigeria, and there is apparently a knowledge gap in this care by both nurses and clients; most clients do not know their right not to talk or stand for them, nor do the nurses have a perception of the legal implications of negligent acts.

There is a great need for negligent act among nurses in hospitals to be properly addressed by the nursing body, this is because, if this act is not properly addressed, there will be recurrent cases of negligence in hospitals as nurses who engage in this act may be ignorant of the implications of negligence and this will result to further healthcare problems. This will also result in portraying a bad image of the nursing profession (Cletus, 2017).

Negligence arising from medical acts may result in a civil action by the injured party or a criminal prosecution by the state (Bryden, 2011). Common law jurisdictions may differ slightly in the exact classification of the elements of negligence, but the elements that must be established in all negligence cases are;

Duty of care: In tort law, a duty of care is a legal obligation imposed on an individual requiring adherence to a standard of reasonable care while performing any act that could foreseeably harm others. The outcome depends on whether the defendant owed a duty to the plaintiff. A duty arises when the law recognises a relationship between the defendant and the plaintiff requiring the defendant to act certain/manner toward the plaintiff. Duty is normally not an issue because the nurse, as an employee, has agreed to the assignment.

Breach of duty: This is the failure of the nurse to follow the standard of care found in the hospital unit policies and procedures, authoritative nursing textbooks, the board of registered nurses and the nursing speciality association guidelines/standards.

Standard of care can be defined as care taught in nursing schools, with reference text textbooks and the hospital policy and procedure manuals. It is also the nurse's responsibility to obtain continual knowledge of the ongoing changes in health care. It is not enough for the plaintiff to prove that the defendant owed him or her a duty; the plaintiff must also prove that the defendant breached his or her duty to the plaintiff. A nurse breaches this duty by failing to exercise reasonable care in fulfilling the duty.

Causation

For the case to be compensable, the act of negligence done would have resulted in the outcome. The plaintiff must prove that the defendant's action was the actual cause of the injury. This is often called "but for" causation, meaning that, but for the defendant's action, the plaintiff's injury would not have occurred.

Damage

It is not enough that the nurse fails to exercise reasonable care. Failing to exercise reasonable care must result in actual damages to a person to whom the nurse owed a duty of care. Lastly, there must be an injury. If no injury, there is no established negligence. Nurses provide services that maintain respect for human dignity and embrace the uniqueness of each patient and the nature of his/her health problems, without restriction regarding the social or economic status of the patient (American Nurses Association, 2015).

A patient's bill of rights is a list of guarantees for those receiving medical care. It may be a law or a non-binding declaration. Typically, it guarantees patients' information, fair treatment and autonomy over medical decisions, among other rights. On July 31st 2018, Vice President Professor Yemi

Osinbajo in Abuja launched Nigeria's first patient's Bill of Rights (PBOR) developed by the Consumer Protection Council (CPC) in collaboration with the Federal Ministry of Health (Samuel, 2021).

According to Samuel (2021) the twelve rights every patient is entitled to are: right to relevant information, right to timely access to medical records, right to transparent billing, right to privacy, right to clean healthcare environment, right to be treated with respect, right to receive urgent care, right to reasonable visitation, right to decline care, right to decline or accept to participate in medical research, right to quality care, right to complain and express dissatisfaction regarding services received.

Negligence is a failure to exercise the care toward others that a reasonable or prudent person would do in the circumstances. Nursing malpractice occurs when a nurse does not perform medical duties competently it resulting in a patient being injured. Malpractice is defined differently under state nurse practice acts, institutional policies, and federal guidelines. Improper, unethical conduct, unreasonable lack of skill by a holder of a professional or official position; often applied to doctors, dentists, lawyers, and public officers to denote negligent or unskillful performance of duties when professional skills are obligatory. This study was conducted by Josina, Anjani, Suchitra and Arumugan (2017), titled Assessment of Knowledge Regarding Negligence Among Staff Nurses in NMCH, Nellore. It revealed that level of knowledge regarding negligence among staff nurses 2(6.7%) have A+ grade, 3(10%) have A grade, 6 (20%) have B+ grade, 8(26.6%) have B grade, 5 (16.7%) have C grade and 6(2%) have D grade. It was concluded that staff nurses have a mean knowledge score of 20.5, and of the 26.6% staff nurses got a B grade. Therefore, there is a need to educate the staff nurses on negligence (Josina, Anjani, Suchitra and Arumugan, 2017).

Another study conducted by Cletus *et al*. (2017), titled Assessment of Knowledge, Attitude and Perception of Nurses on the Legal Implications of Negligence. The target population was nurses working in Jos University Teaching Hospital (JUTH), Jos, Plateau State. The result reveals that 84% (81) of the respondents are aware of what negligence is, 85.4% (82) and 83.3% (80) said that lack of communication by a nurse to a doctor and shortage of registered nurses, respectively, are factors leading to negligence. The study further revealed that the majority of the nurses were informed about the patient's bill of rights. From the result, all the 96 respondents were aware that confidentiality of health information and respect/non-discrimination are included in patients' rights. 84(87.5%) further said that access to emergency management is inclusive. 83(86. 5%) respondents are aware of the legal implications of their actions, 90(93.8%) respondents said they know that they are liable to be punished for negligence, while none of the respondents said they are not liable to be punished. 94(97.9%) respondents said that they have a positive attitude towards clients because of the implications of negligence. All 96 respondents said their attitude towards carrying out procedures is highly influenced by the legal implications of negligence. The result further showed that 78(81.3%) respondents think that being punished for negligent actions improves the standard of care rendered to clients, while 75(78.1%) of respondents think that punishment for negligence will improve professional conduct. The study concluded that most nurses in Jos University Teaching Hospital are knowledgeable about the legal implications of negligence and maintain a positive behaviour towards their patients because of having a good perception of what may result from their negligent acts (Cletus, 2017).

A study conducted by Oladele (2016), titled Assessment of knowledge of Nurses on the legal part of negligence among nurses in a hospital in Calabar. The study revealed that nurses know about the general law of the land, but the majority have knowledge deficits of the law governing nursing practice. About 57% of nurses indicated that their hospital's institutional policies govern how nurses practice, but only 50% knew the content and intent of the policies (Olayinka, 2019).

There have been advances in nursing practice, and there have also been new polices guiding nursing practice as well. Over time, there have been new policies and ethics guiding nurses, and they are on standby to judge nurses who carry out negligent acts. Most nurses today are not aware of these new legal implications against negligence, and so it is important that an awareness program is carried out to enlighten nurses on these new legal implications of negligence. Kumar *et al* (2013) carried out a study to assess knowledge of legal awareness on the implications of negligence among nurses in Delhi hospital. It revealed that a majority, 90% of nurses, had only a moderate level of knowledge of legal awareness.

Over time, the attitude of nurses towards the legal implications of negligence has changed negatively, as nurses today are neglecting the legal implications of negligent acts in hospitals. Practising nurses today need to have a positive attitude towards their patients in delivering healthcare services, knowing about the implications following any negligent act.

Adeleke (2009) conducted research in the University of Ilorin teaching hospital to study the attitude of nurses towards legal liability of negligence. The study revealed that nurses with good training will have a positive attitude towards their clients. Knowledge of Nurses towards lawsuits; nurses will have frequent exposure to the legal framework of negligence.

Several factors have led to various acts of negligence among nurses. This has made nurses ignorant of the legal implications of negligence. A study conducted by Mohammed (2017), titled Factors causing negligence among nurses in a hospital in Port-Harcourt. The study showed that poor communication between nurses and their patients, and a shortage of manpower were major factors causing negligent acts among nurses. It was concluded that these factors needed to be properly addressed to eradicate negligence in hospitals.

Negligence in nursing occurs when the care provided by a nurse fails to meet a reasonable standard, resulting in mental and/or physical suffering or harm to a patient. This can be when nursing care fails to meet the standard of a reasonable, competent nurse. No nurse today can confidently say they have never committed a negligent offence either by commission or omission; in other words is hard to practice nursing or medicine and completely be free from it. This is becoming a very sensitive issue as many lives have been harmed or lost through negligence, either by commission or omission. For instance, a nurse who has not had adequate rest might make medical errors due to the high fatigue-induced lapses in concentration. The advent of new technology and new medical devices has placed an additional stressor on the nurses, which might lead to negligence due to poor knowledge about the usage of such medical devices, leading to unintentional harm to a patient. Under-staffing or inadequate resources in the hospital, in turn, escalates the chances of negligence occurring. Hospitals today have a high patient-to-nurse ratio; hence, nurses have little time to devote to each patient, which could lead to missed signs of patient distress or miscommunication of essential patient information. Only a few of these nurses are aware of the implications of this act, and those who are aware either feel less concern because of the type of legal system in the nation. If nurses are highly aware of the implications of

these acts, this will help to minimise them to a very high extent, hence saving a very high number of lives.

Method and Materials

Research Design: A descriptive research design was used to assess nurses' perceived knowledge and attitudes regarding the legal implications of negligence in care delivery at the University of Abuja Teaching Hospital (UATH), Gwagwalada.

Target Population: The study population comprised all nurses working in the University of Abuja Teaching Hospital (UATH), FCT, Abuja, which is 520 Nurses (UATH Statistics: January 2022).

Sample Size: Taro Yamane's formula was adopted to determine the sample size for this study.

$$n = \frac{}{1 + N(e)^2}$$

Where n = Sample size desired
N = Total population
e = Level of precision or sampling error (assumed as 0.07) at 95% confidence level

$$n = \frac{520}{1 + 520\ (0.07)^2}$$

$$n = \frac{520}{1 + 520\ (0.0049)}$$

$$n = \frac{520}{3.54}$$

n = 147

Sampling Technique and Tool for Data Collection

Non-probability convenience sampling was employed due to nurses' varied duty schedules. Researchers approached available nurses in different wards and units. A self-structured questionnaire with closed-ended questions was designed based on the study objectives. Face and content validity were ensured through expert review. Reliability was tested using Cronbach's alpha (0.838), indicating good reliability.

Method of Data Collection and Analysis

Questionnaires were self-administered to consenting respondents. All statistics were done using SPSS version 26, presenting descriptive statistics: frequency distributions, percentages and mean. A 5-point Likert scale was used, with mean scores above 2.50 considered high/accepted. Objectives one and four were answered using descriptive statistics of percentage correlation, while objectives two and three were answered using a 5-point Likert scale with a mean score benchmark of 2.50 for decision making.

Ethical Consideration

Ethical approval was obtained from the hospital (Ref: FCT/UATH/HREC/11198, Protocol: UATH/HREC/288). Participants were informed about the study, assured of anonymity and confidentiality, and verbal consent was obtained.

Results

Table 1: Socio-Demographic Characteristics of Respondents, n=147

Variables	Frequency	Percentages (%)
AGE		
21-25	12	8
26-30	36	25
31-35	44	30
36 & Above	55	37
SEX		
Male	39	27
Female	108	73
MARITAL STATUS		
Single	31	21
Married	98	67
Widowed	17	11
Divorced	1	1
ETHNICITY		
Hausa	20	13
Yoruba	48	33
Igbo	28	19
Others	51	35
EDUCATIONALQUALIFICATION		
RN/RM	20	14
BNSC	79	53
MSC	38	26
Others	10	7
PROFESSIONAL STATUS		
NOII	35	24
NO I	34	23
SNO	30	20
PNO	11	8
ACNO	22	15
CNO	15	10
WORK EXPERIENCE		
1-10years	41	28
11-20years	85	58
21-30years	14	9
31 & above	7	5

From Table 1, the majority of the respondents, 55(37%), were between the ages of 36 years and above, while 12(8%) of the respondents were between the ages of 21-25 years. The table also shows that the majority of the respondents, 108(74%), were married. The majority of the respondents, 51(35%), were from other ethnicities (not specified in the questionnaire). Findings from Table 1 also show that the majority of the respondents, 79(54%), were graduates of Nursing Sciences (BNSc), while 10(7%) of the respondents had other certificates in nursing not specified in the questionnaire. The table indicates that the majority of the respondents, 35(29%), were Nursing Officer II, while 15(10%) were Chief Nursing Officers. Finally, the table shows that the majority of the respondents, 85(58%), have worked between 11 and 20 years.

Table 2: Awareness of Nurses on the Legal Implications of Negligence, n=147

Variable	Category	Frequency	Per cent (%)
Have you heard of the legal implications of negligence?	**Yes**	147	100
	No	0	0
If yes, what were your sources of information?	Nursing	88	60
	lectures/workshops	43	29
	Nursing textbooks/notes	12	8
	Seminar/conferences	4	3
	Mass media	0	0
	Hospital policies and ethics.		
Are you aware that a nurse can be sued in court by a patient because of a negligent act?	**Yes**	128	87
	No	19	13
Overall	**Positive correlation**	**121**	**82**
	Negative correlation	**26**	**18**

Table 2 above shows the respondents' awareness of the legal implications of negligence. The table shows that all the respondents, 147(100%), have heard of the legal implications of negligence before. The majority of the respondents, 88(60%), heard about the legal implications of negligence from nursing lectures and workshops, while 4(3%) heard about it from the mass media. The table also shows that the majority of the respondents, 128(87%), are aware that a nurse can be sued in court by a patient because of a negligent act, while 19(13%) were in disagreement. Since the positive correlation (82%) is greater than the negative correlation (18%) of the respondents based on the results from the SPSS analysis, respondents were aware of the legal implications of negligence.

Table 3: Perceived Knowledge of Nurses on Legal Implications of Negligence, n=147

Statement	5 SA	4 A	3 U	2 D	1 SD	Mean (x)	Decisions
Negligence is failing to exercise the care toward others that a reasonable or prudent person would do in the same circumstances.	79 (54%)	58 (46%)	0 (0%)	0 (0%)	0 (0%)	4.25	Strongly Agreed
Nurses are eligible to be punished for an act of negligence	4 (3%)	65 (44%)	58 (53%)	20 (0%)	0 (0%)	4.26	Strongly Agreed
Negligent acts are not tolerated by the law/ethics guiding nursing practice	18 (33%)	61 (55%)	58 (12%)	10 (0%)	0 (0%)	3.57	Agreed
The license of a practising nurse can be seized because of a negligent act	21 (14%)	50 (48%)	44 (27%)	32 (12%)	0 (0%)	3.39	Moderately Agreed
Negligence can result in litigation	43 (29%)	59 (69%)	25 (10%)	20 (0%)	0 (0%)	3.84	Agreed
Aggregate Mean						**3.86**	**High**

Table 3 shows the perceived knowledge of nurses on the legal implications of negligence. The findings from the table show that the majority of the respondents strongly agreed that negligence is failing to exercise the care toward others, which a reasonable or prudent person would do in the same circumstances, as represented by the decision made with a mean of 4.25. The table also shows that the majority of the respondents strongly agreed that nurses are eligible to be punished for the act of negligence, as represented with a mean score of 4.26. The majority of the respondents agreed that negligent acts are not tolerated by the laws and ethics guiding nursing practice, as represented by a mean score of 3.57. The findings from the table also show that the majority of the respondents moderately agreed that the license of a practising nurse can be seized because of a negligent act, as represented by a mean score of 3.39. The findings from the table also show that the majority of the respondents agreed that negligence can result in litigation. Table 4.3 shows that the respondents had a high knowledge of the legal implications of negligence as represented by an aggregate mean of 3.86.

Table 4: Perceived Attitude of Nurses towards the Legal Implications Of Negligence, n=147

Statement	5	4	3	2	1	Mean (x)	Decisions
	SA	A	U	D	SD		
Nurses are expected to adhere to and have a positive attitude towards the standard of practice in carrying out their professional responsibilities	6 (4%)	102 (69%)	39 (27%)	0 (0%)	0 (0%)	3.76	Agreed
Nurses perform each procedure to avoid the legal implications of negligence	39 (27%)	57 (39%)	31 (21%)	20 (14%)	4 (3.4%)	3.77	Agreed
Thought of being punished for negligence improves the standard of care rendered.	5 (3%)	50 (34%)	31 (21%)	40 (27%)	21 (14%)	2.7	Disagreed
Legal implications of negligence do not apply to all nurses	0 (0%)	0 (0%)	19 (13%)	66 (50%)	62 (42%)	1.69	Strongly disagreed
Legal implication of negligence brings about positive behaviour	15 (10%)	49 (33%)	46 (31%)	37 (25%)	0 (0%)	3.27	Moderately agreed
Punishment for negligence does not improve professional conduct	26 (18%)	27 (18%)	41 (28%)	28 (19%)	25 (17%)	2.99	Moderately agreed
Aggregate Mean						**3.03**	**Moderately high**

Table 4 above shows the attitude of nurses towards the legal implications of negligence. The table shows that the majority of the respondents agreed that nurses are expected to adhere to and have a positive attitude towards the standard of practice in carrying out their professional responsibilities, as represented by a mean of 3.76. Also, the majority of the respondents agreed that nurses perform each procedure to avoid legal implications of negligence, as represented by a mean of 3.77. The table also shows that the majority of the respondents disagreed that the thought of being punished for negligence improves the standard of care rendered, as represented by a mean of 2.7. Also, the majority of the respondents strongly disagreed that the legal implication of negligence does not apply to all

nurses, as represented by a mean of 1.69. The table also shows that the majority of the respondents moderately agreed that the legal implication of negligence brings about positive behaviour, as represented by a mean score of 3.27. Lastly, findings from the table show that the majority of the respondents moderately agreed that punishment for negligence does not improve professional conduct, as represented by a mean of 2.99. The mean on the attitude towards the legal implications of negligence among nurses was 3.03, which implies that the majority of the nurses in UATH have a positive attitude towards the legal implications of negligence.

Table 5: Showing Factors Responsible for Negligent Act Among Nurses, n=147
F = Frequency P = Percentage

Statement	F(P)			F	P
	YES- F(P)	NO- F(P)	UNDECIDED- F(P)	F	P
Poor communication between the nurse and the patient can result in negligence	**117 (79.5%)**	**13 (9%)**	**17 (11.5%)**	**147**	**100%**
Failure to seek higher medical authority for treatment can result in negligence	**105 (71.4%)**	**10(6.8%)**	**32 (21.8%)**	**147**	**100%**
Workload/shortage of registered nurses contributes to the act of negligence by nurses	**133 (90.5%)**	**0 (0%)**	**14 (9.5%)**	**147**	**100%**
Failure to listen to patients' complaints and observe patients' ongoing progress of treatment can result in to act of negligence	**115 (78.2%)**	**16(10.9%)**	**16 (10.9%)**	**147**	**100%**

Table 5 shows the factors responsible for the act of negligence among nurses in UATH. Findings from the table show that the majority of the respondents **(79.5%)** agreed that poor communication between the nurse and the patient can result in negligence. Also, the table shows that the majority of the respondents **(71.4%)** agreed that failure to seek higher medical authority for treatment can result in negligence. Findings from the table also show that workload and shortage of registered nurses contribute to the act of negligence by nurses **(90.5%)**. Lastly, the table shows that the majority **(78.2%)** of the respondents agreed that failure to listen to patients' complaints and observe patients' ongoing progress of treatment can result in to act of negligence. Thus, these therefore show the above factors, such as poor communication between nurse and patient, failure to seek higher medical authority before treatment, workload/shortage of nurses and failure to listen to patients' complaints, are among the factors responsible for the act of negligence among nurses in UATH, Abuja.

Discussion

The study was carried out to assess awareness, knowledge and attitude towards the legal implications of negligence among nurses in the University of Abuja Teaching Hospital, Gwagwalada, where the majority of the respondents were 36 years and above. The majority of the respondents were married. This is because the majority of the nurses working in UATH are married, with only a

smaller number who are single. Most respondents were from other ethnic groups apart from Hausa, Yoruba and Igbo. The majority of the respondents were graduates of Nursing Sciences (BNSc). This is because most nurses who work in UATH need to have a degree in nursing as a requirement before they are employed, so the majority of the nurses have a degree in nursing. The majority of the respondents were Nursing Officer II. This is because most nurses captured for this study were those with a professional status of Nursing Officer II, since the study adopted a convenience sampling technique, which enables the researcher to use any respondent available to the researcher. Lastly, the majority of the respondents have had working experience between 11 and 20 years. This implies that most practising nurses in UATH have been working in the hospital for a long time. This was also of benefit because most of the information given was from nurses working for a long time in the hospital.

Findings from this study revealed a high level of awareness of the legal implications of negligence among nurses in UATH, with a positive correlation of 88% which is high. This implies that most nurses in UATH were all aware of what legal implications of negligence was showing a high awareness level. The finding corresponds with a study carried out by Cletus, Ajayi, Ogunyewo, Ajio, Andy, Oyedele, Daniel, Solomon and Bello (2017) on assessment of knowledge, attitude and perception of nurses on the legal implications of negligence in nursing practice among nurses working in Jos University Teaching Hospital (JUTH), Jos, Plateau State, where they reported that 83(86. 5%) respondents are aware of the legal implications of their actions, 90(93.8%) respondents said they know that they are liable to be punished for negligence.

Findings from this study also showed a high level of knowledge among nurses in UATH about negligence. The majority of the respondents strongly agreed that negligence is failing to exercise the care toward others that a reasonable or prudent person would do in the same circumstances. This shows that the UATH nurses knew what it means to be negligent or carry out an act of negligence. The majority of the nurses also strongly agreed that nurses are eligible to be punished for the act of negligence. This is because most respondents agreed that negligent acts are not tolerated by the laws and ethics guiding nursing practice, and so any act of negligence can result in severe litigation. The majority of the respondents moderately agreed that the license of a practising nurse can be seized because of a negligent act. This was because the nurses knew what the complications of negligence might be and to what extent it could lead. Thus, the level of knowledge on the legal implications of negligence shown by the nurses in UATH was high, as shown by an overall mean value of 3.86. However, the level of knowledge shown by the nurses was high enough, but it also implied that nurses in UATH need more knowledge on the legal implications of negligence, as the knowledge gap was small. The findings from the study correspond with the findings of the study carried out by Cletus *et al*. (2017) on assessment of knowledge, attitude and perception of nurses on the legal implications of negligence in nursing practice among nurse, it reported that most nurses in Jos University Teaching Hospital are knowledgeable on the legal implications of negligence and maintain a positive behaviour towards their patients because of having a good perception of what may result for their negligent acts.

The findings from this study revealed that, regarding attitude, the aggregate mean of 3.03 is high. It can be deduced that the majority of the nurses in UATH have a positive attitude towards the legal implications of negligence, though there was a problem of indecisiveness by 31% and disagreement by 25% on the fact that legal implication brings about positive behaviour. Also, 18% of the respondents strongly agreed and 18% also agreed that

punishment for negligence does not improve professional conduct. This implies that nurses in UATH need to improve in having a good attitude towards the legal implications of negligence. They need more knowledge and training on the implications of negligence in nursing practice to develop their attitude towards it. This finding corresponds to the finding of Adeleke (2009), who carried out a study to assess the attitude of nurses towards legal liability of negligence among nurses, which revealed that nurses with good training will have a positive attitude towards their clients.

More so, findings of the study regarding factors responsible for the act of negligence among nurses in UATH revealed the following. It can be deduced that these items: poor communication between nurse and patient, failure to seek higher medical authority before treatment, workload/shortage of nurses and failure to listen to patients' complaints were among the factors responsible for the act of negligence among nurses in UATH. This implies that though some nurses might want to deliver nursing care to patients with any act of negligence but these factors are serving as hindrances to providing competent and negligence-free care/practice in the hospital. Thus, these factors need to be addressed. This finding corresponds with a similar study by Mohammed (2017), aimed to determine factors causing negligence among nurses in a hospital in Port-Harcourt. The study reported that poor communication between nurses and their patients, and a shortage of manpower were major factors causing negligent acts among nurses. It was concluded that these factors needed to be properly addressed to eradicate or reduce the act of negligence in hospitals. This finding is also in line with the findings of Cletus *et al*. (2017), which also revealed that lack of communication by a nurse to a doctor and shortage of registered nurses, respectively, are factors leading to negligence.

Conclusion

There was a high level of awareness of the legal implications of negligence among nurses in UATH, with a positive correlation of 88%. The study also showed a high level of knowledge among nurses in UATH about negligence and its legal implications. It can be deduced that the majority of the nurses in UATH have a positive attitude towards the legal implications of negligence, though there was a problem of indecisiveness by 31% and disagreement by 25% on the fact that legal implication brings about positive behaviour. Also, some of the nurses (36%) agreed that punishment for negligence does not improve professional conduct. Poor communication between nurses and their patients, and a shortage of manpower, among others, were major factors causing negligent acts among nurses; these factors needed to be properly addressed to eradicate or reduce the act of negligence in the hospitals.

Recommendations

Considering the findings from this study, these recommendations were made:

1. Nurses and nursing students should undergo some special training and retraining on laws guiding the profession, as this will help them to be more aware and accountable for their actions.
2. Incorporation of legal studies into various Nursing curricula will foster skill in service delivery.
3. Hospital management should ensure adequate employment of nurses for effective service delivery and reduce workload.
4. Hospitals should educate patients /clients on their rights and limitations, as well as nurses' rights and encourage best practices in their establishments.
5. Nursing audit should be upheld and sustained in every establishment.
6. The factors identified as the causes of negligence in this study should be

properly addressed by nursing agencies and the government to help eliminate the crisis of legal implications of negligence in hospitals.

Conflict of interest: The authors declare that there is no conflict of interest**.**

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